

RECEIVED
CENTRAL FAX CENTER

JUL 27 2005

Medtronic

Facsimile Cover Sheet

MEDTRONIC LAW DEPARTMENT - CONFIDENTIAL**Attention:** Centralized Fax Number**Company:** United States Patent and Trademark Office**Telephone:****Facsimile:** 571-273-8300**Application No.:** 09/519,563**Filing Date:** March 6, 2000**From:** Keith M. Campbell, Esq.**Telephone:** 763-505-0405**Facsimile:** 763-505-0411**Our Ref. No.:** P-7354.03US**Date:** July 27, 2005**Pages (including cover page):**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO on the date shown above:

1. Transmittal form
2. Submission of formal drawings
3. 8 pgs of formal drawings

Keith M. Campbell
46,597

NOTICE

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ON THIS TRANSMITTAL FORM. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION, OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY Joel Nickel at (763) 505-0184. THANK YOU.

PTO/SB/21 (09-04)

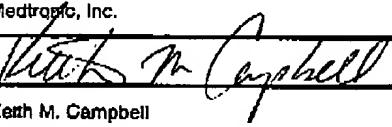
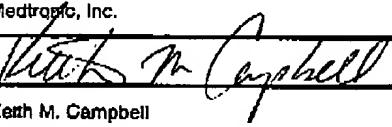
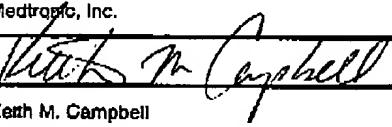
Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	08/519,563
Filing Date	March 6, 2000
First Named Inventor	Markus Haller
Art Unit	3763
Examiner Name	Michael M. Thompson
Attorney Docket Number	P-7354.03

ENCLOSURES (Check all that apply)																		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> Alter Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Submission of formal drawings																
Remarks																		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT <table border="1"> <tr> <td>Firm Name</td> <td colspan="3">Medtronic, Inc.</td> </tr> <tr> <td>Signature</td> <td colspan="3"></td> </tr> <tr> <td>Printed name</td> <td colspan="3">Keith M. Campbell</td> </tr> <tr> <td>Date</td> <td>July 27, 2005</td> <td>Reg. No.</td> <td>46,597</td> </tr> </table>			Firm Name	Medtronic, Inc.			Signature				Printed name	Keith M. Campbell			Date	July 27, 2005	Reg. No.	46,597
Firm Name	Medtronic, Inc.																	
Signature																		
Printed name	Keith M. Campbell																	
Date	July 27, 2005	Reg. No.	46,597															

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature		
Typed or printed name	Jodi D. Nickel	Date 7/27/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED
CENTRAL FAX CENTER

JUL 27 2005

PATENT
Docket No.: P-7354.03US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: **Marcus Haller** Group Art Unit: **3763**
Application No.: **09/519,563** Examiner: **Michael M. Thompson**
Filing Date: **March 6, 2000** Due Date:
For: **Drive Circuit having Improved Energy Efficiency for Implantable
Beneficial agent Infusion or Delivery Device**

SUBMISSION OF FORMAL DRAWINGS

Mail Stop: Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

In response to the Notice of Allowability mailed on April 28, 2005, attached please find the formal drawings for this application with each sheet indicating the application number, inventor, title, and docket number on the top of the drawings. Number of sheets:8, figures1-7.

Respectfully submitted,

Keith M. Campbell
Registration No. 46,59
MEDTRONIC, INC.
710 Medtronic Parkwa
Minneapolis, Minneso
Telephone: (763) 505-
Facsimile: (763) 505-
Customer No.: 27581